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**DECLARATION FOR UTILITY OR** 

PTO/SB/01 (03-01)
Approved for use through 10/31/2002. OMB 0651-0032

G. E. Tornquist

H0002286

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Attorney Docket Number

DECLARATION OR	First Named Inventor G. E. Torriquist							
DESIGN	COMPLETE IF KNOWN							
PATENT APPLIC (37 CFR 1.6	Application Numbe							
		Filing Date	Herewith					
Submitted OR S	Declaration Submitted after Initial	Group Art Unit						
with Initial	Initial Filing (surcharge (37 CFR 1.16 (e))							
T III.19	equired)	Examiner Name						
As a below named inventor, I hereby declare that:								
My residence, mailing address, and citizenship are as stated below next to my name.								
or an original, first and joint inventor (if plural								
I believe I am the original, first and sonames are listed below) of the subjection	ct matter which is claimed	d and for which a patent	s sought on the	e invention entitled:				
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I hereby state that I have reviewed	and understand the cont	ents of the above identific	ed specification	, including the claims, as				
amended by any amendment speci	mically referred to above.							
in-part applications, material information which became available some and application.								
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other or plant breeder's rights certificate(s), or 365(a) of any PCT international application having a filing date before that of the								
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application on which priority is clair Prior Foreign Application		Foreign Filing Date	Priority	Certified Copy Attached?				
Number(s)	Country	(MM/DD/YYYY)	Not Claimed	YES NO				
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				B/02B attached bereto:				
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:								

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Additional inventors are being named on the \_

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## **DECLARATION** — Utility or Design Patent Application **Customer Number** 000128 Correspondence address below OR Direct all correspondence to: or Bar Code Label Name **Address Address** ZIP State City Fax Telephone Country I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. A petition has been filed for this unsigned inventor NAME OF SOLE OR FIRST INVENTOR: Family Name Tornquist **Given Name** G.E. or Surname (first and middle [if any]) inventor's Signature USA USA ΑZ Tucson Citizenship Country State Residence: City 8030 N. Totavi Trail **Malling Address** Mailing Address USA 85407 AZ ZIP State\_ City ☐ A petition has been filed for this unsigned inventor NAME OF SECOND INVENTOR: Family Name Borden Raymond W. **Given Name** or Sumame (first and middle [if any]) **Inventor's** Signature USA NJ Farmingdale Citizenship Country Residence: City State 5 Smith St. **Mailing Address Malling Address** USA ZIP 07727 **City** Farmingdale NJ Country State

supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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## **DECLARATION**

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 3 of 4

Name of Additional Joint Inventor, if any	<b>/</b> :	_ /	A petition has been file	d for this	s unsigned inventor
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Ming			Xu		
Inventor's Signature					Date 8/21/01
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Name of Additional Joint Inventor, if any:					
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Kieran P.J. Doherty					
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## **DECLARATION**

## ADDITIONAL INVENTOR(S) Supplemental Sheet Page 4 of 4

Name of Additional Joint Inventor if any	<i>/</i> :		A petition has bee	n filed for t	this unsigned inventor	
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Given Name (first and middle [if any])			Family Name or Sumame  McDowall			
Inventor's July 1	>1/				0,00 72	
Inventor's Signature	TOU!	<del>,</del>			Date 01.08.22	
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Mailing Address  Tucson	State A	 Z	ZIP 85737	Coun	USA	
Name of Additional Joint Inventor, if any		<u>_</u>	A petition has been filed for this unsigned inventor  Family Name or Surname			
Given Name (first and middle [if any])	· · ·		Fairing	Hame or	<u> </u>	
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Residence: City	State		Country		Citizenship	
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